GOVERNMENT OF INDIA
HEALTH AND FAMILY WELFARE
LOK SABHA

STARRED QUESTION NO:91
ANSWERED ON:21.11.2007
SHORTAGE OF TRAINED NURSES
Jindal Shri Naveen

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether there is an acute shortage of trained nurses in the country, particularly in the Government hospitals;

(b) if so, the details thereof;

(c) whether this fact was highlighted at the International Neo-Natal Conference held in New Delhi in September, 2007;

(d) if so, the details thereof;

(e) the main recommendations/suggestions made by the Conference on the issue; and

(f) the concrete measures taken by the Government to meet the shortage of nurses, particularly in the rural areas?

Answer

MINISTER OF THE STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMADOSS)

(a)to(f): A statement is laid on the Table of the House.

STATEMENT REFERRED TO IN REPLY TO LOK SABHA STARRED QUESTION NO. 91 FOR 21ST NOVEMBER, 2007
As per the Bajaj Committee recommendations of Nursing Staffing norms, 10.43 lakhs Nurses would be required by 2012. With the existing training capacity, 6.84 lakhs Nurses are expected to be trained by 2012. However, the position of Nurses in the Central Government Hospitals is satisfactory.

This aspect was discussed in the 6th International Neo-Natal Nurses Conference organized by National Neonatology Forum on September 15-18, 2007.

The highlights/ recommendations and suggestions made by the Conference are indicated below:

The acute shortage of nurses particularly of specialized nurses in new born care need to be addressed urgently. There is even greater shortage and virtually non existence of neonatal nursing cadre in rural India. Nurses should be recruited, trained and posted at PHC and above to provide care at birth, essential newborn care and care of sick neonates. There should be atleast two or three nurses dedicated to newborn care at PHC, 5-6 at FRU/CHC and 10-12 nurses at District Hospitals which is ideal. It is advisable to use every nursing personnel at PHC to be involved in newborn care not only at the health facility but also at the community level. Nurses in charge at level II units at District hospitals should be a trained neonatal nurse with Post Basic Diploma in Neonatal Nursing or at least B.Sc Nursing graduate. Creation of a Cadre of Neonatal Nurse Practitioner, to begin with at Institutional Level and gradually employed at Special Care New born Units at District Hospitals. The nurses involved in maternal, newborn and child health should be encouraged to participate in various national and international conferences/ workshop to update their knowledge and to acquire confidence and improve self esteem. This would also help them to acquire a leadership for further training and advocacy. The organizers of the conference thank government of India and also State government for taking the initiative of encouraging and fully supporting the nurses to participate in this International Conference.

The measures taken by the Indian Nursing council to promote for Opening of additional Nursing Educational Institutions to meet the shortage of nurses are as follows:-

Syllabus for Auxiliary Nurse Midwifery (ANM) Training & B.Sc (N) programme has been revised. The components of Integrated Management of Neonatal & Childhood Illness (IMNCI) and National Rural Health Mission (NRHM) have been incorporated in the revised syllabus.
One year Post Basic Diploma in Neonatal Nursing Programme has been developed to train specialized Neo-natal Nurses.
Relaxed student patient ratio. The ratio has been reduced from 1:5 to 1:3
Relaxed norms for teaching faculty to start B.Sc(N) Programme
At least 2 M.Sc.(N) faculty to be available
Qualification and Experience has been relaxed
Relaxation for opening M.Sc(N) programme. Super speciality Hospital can start M.Sc.(N) without having under graduate programme.

Admission for Nursing allowed for married candidates.
Age increased for Teaching Faculty up to 70 years
Maximum of 100 seats will be given to those parent hospitals with 300 beds without insisting on Medical College.
Government of India under NRHM has approved one additional ANM at the sub-centre level and three posts of Staff Nurses at PHC and 2 additional posts of Staff Nurses at CHC level to provide 24 x 7 Midwifery Services to the rural population.
The Government of India has proposed the following steps in the XI five year plan to bridge the gap by taking further following steps: -

(i) Establishment of Auxiliary Nurse Midwifery (ANM) and General Nursing and Midwifery (GNM) schools in those districts which are not having both these training programmes.

(ii) Establishment of post graduation Nursing (M.Sc Nursing) Institutions.

(iii) Renewal of registration once in every 5 years linked with Continuing Education

(iv) Establishment of Regional Institute of Excellence with the objective of improving the standard on all India basis and provide opportunity to access high quality Nursing Education through out the country.

(v) Strengthening of State Nursing Councils

(vi) Strengthening of Nursing Cells at the State level.

Priority has been given under NRHM for Strengthening of Nursing Education and Service in the rural area.